

CLAIMS ONLY

Application Number

1017190 PP

Filing Date

Application

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51			
2							52			
3							53			
4							54			
5							55			
6							56			
7							57			
8							58			
9							59			
10	1						60			
11							61			
12							62			
13							63			
14							64			
15							65			
16							66			
17							67			
18							68			
19	1						69			
20							70			
21							71			
22							72			
23							73			
24							74			
25							75			
26							76			
27							77			
28							78			
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31							81			
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37							87			
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39							89			
40							90			
41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total dep	3						Total Indep			
Total Depend	17						Total Depend			
Total Claims	80						Total Claims			